

TEXAS DEPARTMENT OF LICENSING AND REGULATION

P.O. Box 12157 - Austin, Texas 78711-2157 1-800-803-9202 - (512) 463-6599 - FAX (512) 475-2871
www.license.state.tx.us - CS.Air.Conditioning@license.state.tx.us

AIR CONDITIONING AND REFRIGERATION TECHNICIAN APPLICATION INSTRUCTIONS

This application may be used for a “registered” or “certified” technician.

**AN APPLICATION IS NOT CONSIDERED COMPLETE AND WILL NOT BE
PROCESSED UNTIL ALL ITEMS HAVE BEEN SUBMITTED AS REQUIRED.**

GENERAL INSTRUCTIONS

The application must be completed and signed by the applicant. All information provided must be typed or printed in black or blue ink. The application and all attachments must be submitted on separate pieces of single-sided, 8½” x 11” paper. Please use a paperclip to fasten all pages together, with the check or money order on top. Please do not use staples.

If one check will be used to pay for multiple applications, a Combined Check Worksheet must be completed and submitted with the applications and payment. The Combined Check Worksheet is available on the Department’s website.

NAME – Please write your name in the spaces provided. (Last, First, Middle Initial)

SUFFIX – Examples of a suffix include JR, SR, and II. (MR is not a suffix)

DATE OF BIRTH – Write the two digit numeric equivalent (ex: 03 for March) for the month of your birth, followed by the two digit day and the four digit year. (MM/DD/YYYY)

NOTE: The minimum age requirement for a technician registration is 18.

GENDER – Write “M” for Male or “F” for Female.

SOCIAL SECURITY NUMBER – The Social Security number disclosure is required by Section 231.302 (1) of the Texas Family Code in order to obtain a license. Your social security number is subject to disclosure to an agency authorized to assist in the collection of child support payments. For more information regarding child support payments, contact the Texas Attorney General at:

www.oag.state.tx.us/child/index or call (512) 460-6000 or (800) 252-8014

MAILING ADDRESS – This is the address to which the Department will mail your correspondence. Indicate the number and street, or post office box of your mailing address. Use of the zip plus-4 is not required, but it helps the postal service direct mail more efficiently and accurately.

PHYSICAL ADDRESS - This is the physical location of your residence. Do not use a post office box for this address.

TELEPHONE NUMBER – Write the telephone number, including area code, where we can reach you during the day. This may be your office phone number where we can leave a message.

E-MAIL – Please provide your e-mail address. The Department will add your address to the air conditionings e-mail list, which provides information from the Department on matters affecting air conditioning technicians. Your e-mail address is confidential pursuant to the Texas Public Information Act, and the Department will not share it with the public.

CONVICTION OF CRIMINAL OFFENSE – Indicate if you have ever been convicted of a criminal offense. If yes, complete and attach a Criminal History Questionnaire for each conviction.

LICENSE SANCTIONS – Indicate if you have ever had an occupational license suspended, revoked, probated, or denied in any state, county or municipality. If you have, complete and attach the Disciplinary Action Questionnaire for each sanction. This form can be obtained from the TDLR website. Note: for the purposes of license sanctions, a driver’s license is NOT an occupational license.

REGISTRATION TYPE

This application may be used to apply for a “registration”, “certification”, or to add the “certification” to an already existing TDLR “registration”.

- If you want to be a “registered” technician, leave the “registration type” area blank.
- If you want to be a “certified” technician, provide the name of the certifying organization and the identifying number provided by the organization, or if this is not available, submit documented proof that you have successfully completed a department approved examination. You may view the most up dated list of approved examinations through our “Frequently Asked Questions” on our website at: <http://www.license.state.tx.us/acr/acrfaq.htm>
- If you have been issued a TDLR “registration”, indicate your registration number in the space provided.

FEES

The technician registration application fee is \$20.

The technician certification application fee is \$35.

Only send in one of the above fees.

If you already have a TDLR registration and want to add a “certification”, the fee is \$15.

SIGNATURE

Carefully read the statement at the bottom of the application before you sign and date the application. Be aware that information provided on this application and any attachments is subject to audit. Providing false information may result in revocation of this license and the imposition of administrative penalties.

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APPLICATION FOR:

AIR CONDITIONING AND REFRIGERATION TECHNICIAN APPLICATION

PURSUANT TO OCCUPATIONS CODE, CHAPTER 1302, TITLE 8

DO NOT WRITE IN THE FEE AREA IMMEDIATELY BELOW

RECEIPT NUMBER	PMT. AMOUNT	MONEY TYPE

DO NOT WRITE ABOVE THIS LINE**THIS APPLICATION MAY BE USED TO APPLY FOR A "REGISTERED" OR "CERTIFIED" TECHNICIAN.****IF ALL REQUIREMENTS FOR A LICENSE ARE NOT MET WITHIN TWELVE (12) MONTHS OF THE FILING DATE, THE APPLICATION WILL BE CLOSED.****1. Name:**

Last _____ First _____ Middle Initial _____ Suffix (JR, SR, III) _____

2. Date of Birth: _____ - _____ - _____
Month Day Year
* The minimum age requirement for a technician registration is 18.**3.** ☐ Female ☐ Male**4. Social Security No.:**

See instructions for further information.

_____ - _____ - _____

5. Mailing Address : (USED FOR ALL CORRESPONDENCE)

(P.O. Box is allowed for this address.)

Number, Street, Suite No., Apt. No. or P.O. Box _____

City _____ State _____ Zip Code _____

(_____) _____

Area Code Phone Number

Physical Location: (P.O. Box is not allowed for this address.)

Number, Street, Suite No., Apt. No. _____

City _____ State _____ Zip Code _____

(_____) _____

Area Code Phone Number

Fax Number and Email Address:FAX Number: (_____) _____
Area Code Phone Number

E-mail Address (Ex: johndoe@aol.com) See Note 2 on instructions

6. Have you ever been convicted of a criminal offense?☐ Yes☐ No

Include all felonies and misdemeanors other than minor traffic violations. This does NOT include driver's licenses. If YES, attach a "Criminal History Questionnaire" with this application.

Have you ever had an occupational license, certification or registration suspended, revoked or denied in any state?☐ Yes☐ No

If YES, attach a "Disciplinary Action Questionnaire" with this application. This does NOT include a driver's license.

THIS FORM CONSISTS OF 2 PAGES.

REGISTRATION TYPE

7. A "Registered Technician" may obtain a "Certified" designation; however, the "Certified" designation is not required to apply for and become a "Registered Technician".

To become "Certified", the name of the certifying organization and the identifying number provided by the certifying organization are required.

- If you are applying to become a "Registered Technician" only, no additional information is needed.
- If you are applying to become a "Certified Technician", complete the information below:

Certifying Organization

Identifying Number provided to you by the Organization

- If you are applying to become a "Certified Technician" AND you are already a "Registered Technician", provide your TDLR issued Registration number: _____

NOTICE REGARDING APPLICABLE FEES

8. If you submit an insufficient fee amount with this application, or submit an outdated application form, it may be returned to you. To verify the correct form version and required fees, consult the TDLR website (www.license.state.tx.us) or contact TDLR using the information at the top of the first page.
- The fee is required to be submitted with this application.
 - The technician registration application fee is \$20.
 - The technician certification application fee is \$35.
 - Only send "one" of the above fees. Do not send a total of \$55. In order to become "certified", you will automatically also be "registered".
 - If you already hold a TDLR Registration and want to add the Certification - ADDING CERTIFICATION FEE IS \$15.
 - ALL FEES ARE NON-REFUNDABLE.

STATEMENT OF APPLICANT

I certify that I have read and will comply with all applicable provisions of the Air Conditioning and Refrigeration Contractors Act; Texas Occupations Code, Chapter 51; Tex. Admin. Code, Chapter 60; and the Air Conditioning and Refrigeration Contractors Administrative Rules, Tex. Admin. Code, Chapter 75.

I further certify that when I perform work for which this registration is required, I will only work under the supervision of a licensed Air Conditioning and/or Refrigeration Contractor.

I understand that providing false information on this application may result in denial of this application and/or revocation of the license I am requesting and the imposition of administrative penalties.

Date Signed

Signature of Applicant